## PART B - FEE(S) TRANSMITTAL

Complete an**ds**end this form, together with applicable fee(s), to: <u>Mail</u> Mail Stop ISSUE FEE Commissioner for Patents AUG 2 8 2007 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate formula turther correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 23400 06/08/2007 7590 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. POSZ LAW GROUP, PLC 12040 SOUTH LAKES DRIVE SUITE 101 **RESTON, VA 20191** (Depositor's name (Signature (Date APPLICATION NO. **FILING DATE** FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/623,804 07/22/2003 Richard D. Roberts XSI.061 / 10X-199 5306 TITLE OF INVENTION: METHOD FOR OPERATING MULTIPLE OVERLAPPING WIRELESS NETWORKS APPLN. TYPE SMALL ENTITY **ISSUE FEE DUE** PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE NO nonprovisional \$1400 \$300 88/29/2007 AUDHDAF2 0000003 10623804 09/10/2007 **EXAMINER** ART UNIT **CLASS-SUBCLASS** 1400.00 OP 61 FC:1501 TRAN, KHAI 300.00 OP 2611 375-256000 62 FC:1504 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Austin, Texas Freescale Semiconductor, Inc. 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1147 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date August 28, 2007 Typed or printed name Brian C. Altmiller Registration No. 37.271

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450,

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Allowed: June 8, 2007

Group Art Unit: 2611

Examiner: TRAN, Khai

Confirmation No.: 5306

flicant(s): ROBERTS et al.

Application No.: 10/623,804

Filed: July 22, 2003

Title: METHOD FOR OPERATING

MULTIPLE OVERLAPPING WIRELESS

**NETWORKS** 

Attorney Docket No.: 10X-199/XSI.061

Commissioner for Patents Alexandria, VA 22314 Mail Stop Issue Fee August 28, 2007

## ISSUE FEE TRANSMITTAL LETTER

Sir:

Enclosed are one original and one copy of an executed Issue Fee Transmittal Form

PTOL-85B for the above allowed patent application as well as a check in the amount of \$1700.00 for payment of the requisite issue fee and publication fee.

Authorization is hereby given to charge any fee deficiencies or credit any overpayment to Deposit Account 50-1147.

Respectfully submitted,

Brian C. Altmiller Reg. No. 37,271

BCA/moa 12040 South Lakes Drive, Suite 101 Reston, VA 20191 (703)707-9110 (phone) Customer No. 23400

| f.,  |                        | This Form Based on PTO/SB/21             |  |  |  |  |  |  |
|--|------------------------|--|--|--|--|--|--|--|
| TRANSMITTAL  | Application Number     | 10/623,804  July 22, 2003  ROBERTS  2611 |  |  |  |  |  |  |
| FORM   | Filing Date            |  |  |  |  |  |  |  |
| (to be used for all correspondence after initial filing) | First Named Inventor   |  |  |  |  |  |  |  |
| AUG 2 8 2007 8   | Group Art Unit         |  |  |  |  |  |  |  |
|  | Examiner Name          | TRAN, Khai                               |  |  |  |  |  |  |
| MADEMAN  | Attorney Docket Number | 10X-199/XSI.061                          |  |  |  |  |  |  |
| ENCLOSURES (check all that apply)                        |                        |  |  |  |  |  |  |  |

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| ENCLOSURES (check all that apply)          |                               |  |      |                        |   |   |   |  |  |  |
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| X  | Fee Transmit                  | tal Form                                 |      |                        | nment Papers<br>n Application)                          |   | After Allowance Communication to Group                            |  |  |  |
|  | X Fee At                      | ttached                                  |      | Drawi                  | ings  |   | Appeal Communication to Board of Appeals and Interferences        |  |  |  |
|  | Amendment /                   | / Response                               |      | Licen                  | sing-related Papers                                     |   | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |  |  |  |
|  | After F                       | inal                                     |      | Petitic<br>and A       | on Routing Slip (PTO/SB/69)<br>accompanying Petition    |   | Proprietary Information   |  |  |  |
|  | Affida                        | vits/declaration(s)                      |      | Provis                 | onvert a<br>sional Application                          |   | Status Letter   |  |  |  |
|  | Extension of                  | Time Request                             |      | Powe<br>Chang<br>Addre | r of Attorney, Revocation<br>ge of Correspondence<br>ss | X | Additional Enclosure(s) (please identify below):                  |  |  |  |
|  | Express Abai<br>Request       | ndonment                                 |      | Termi                  | inal Disclaimer   |   | Issue Fee Transmittal Letter                                      |  |  |  |
|  |                               |  |      |                        |   |   | "Fee Address" Indication Form                                     |  |  |  |
|  |                               |  |      |                        |   |   |   |  |  |  |
|  | Certified Copy<br>Document(s) | y of Priority                            |      | Requ                   | est of Refund   |   |   |  |  |  |
|  | Response to Incomplete A      | Missing Parts/                           | Rema | arks                   |   |   |   |  |  |  |
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|  | Respo<br>Parts u<br>1.52 or   | nse to Missing<br>under 37 CFR<br>r 1.53 |      |                        |   |   |   |  |  |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                               |  |      |                        |   |   |   |  |  |  |
| Firm<br>or<br>Individ                      |                               |  |      |                        |   |   |   |  |  |  |
| Signa                                      | ture                          | e Bri Catta                              |      |                        |   |   |   |  |  |  |
| Date                                       |                               | August 28, 2007                          | -    |                        | •   |   |   |  |  |  |